



05-29-03

OP 16369

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Ashkenazi et al. Docket No.: 39780-1618P2C40
Serial No.: 09/902,572 Group Art Unit: 1636
Filing Date: July 10, 2001 Examiner: Leffers Jr., Gerald G.
For: **SECRETED AND TRANSMEMBRANE POLYPEPTIDES AND
NUCLEIC ACIDS ENCODING THE SAME**

RECEIVED

MAIL STOP: No-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

JUN 02 2003

TECH CENTER 1600/2900

TRANSMITTAL

Transmitted herewith are the following documents for the above-referenced application:

Amendment and Response to Office Action;
 Supplemental Information Disclosure Statement;
 Supplemental PTO Form 1449 with three (13) cited references;
 Copy of Blast Report A & B;
 Authorization to charge Deposit Account No. 08-1641 in the amount of \$180 for the filing fee for the Supplemental IDS/PTO Form 1449.

STATUS

Applicant is
 a small entity
 other than a small entity.

EXTENSION OF TIME

Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
<input type="checkbox"/> one month	\$ 110.00	\$ 55.00
<input type="checkbox"/> two months	\$ 410.00	\$205.00
<input type="checkbox"/> three months	\$ 930.00	\$465.00
<input type="checkbox"/> four months	\$1,445.00	\$725.00

Fee \$ _____

CERTIFICATE OF MAILING (37 CFR 1.10(a))

CERTIFICATE OF MAILING BY "EXPRESS MAIL" - Rule 10: I hereby certify that this correspondence is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" under 37 CFR 1.10 as Express Mail No. EV346728133US addressed to: Mail Stop: No-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: May 27, 2003

Cheryl Rogers
Cheryl Ann Rogers

FEE FOR CLAIMS

If an additional extension of time is required please consider this a petition therefor.

An extension for _____ months has already been secured and the fee paid therefor of \$_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$_____

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	<i>OR</i>	OTHER THAN A SMALL ENTITY
Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	Rate
Total *	Minus *0*	20	= 0	x9= \$	x18= \$
Indep. *	Minus *0*	3	=	x40= \$	x80= \$
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+130= \$		x260= \$
			TOTAL ADDIT.FEE	<i>OR</i>	TOTAL ADDIT. FEE

No additional fee for claims required.

Total additional fee for claims required \$_____.

FEE PAYMENT

Attached is a check in the sum of \$_____ for additional claims fee.

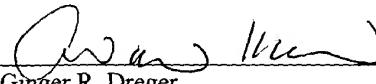
Charge Account No. 08-1641 the sum of \$180.00 for Supplemental IDS/PTO Form 1449 filing fee.

FEE DEFICIENCY

In the event that: a) no check to cover the filing fee is enclosed, b) any above-referenced check is inadvertently omitted or lost, or c) any enclosed check is in an amount less than or greater than the required fee, the Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 08-1641. A duplicate of this authorization is enclosed for that purpose.

Attached is a postcard for date-stamped return as confirmation of receipt of these materials.

Date: May 27, 2003


 Ginger R. Dreger
 Reg. No. 33,055

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